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003750-039



E UNITED STATES PATENT AND TRADEMARK OFFICE

Mail Stop: AMENDMENT

In re Patent Application of

Robert S. Block et al.

Application No.: 10/617,728

Filing Date:

Sir:

July 14, 2003

Title: INTERACTIVE MOBILE FOOD DISPENSER

Group Art Unit: 3653

Examiner: Kimberly S. Smith

Confirmation No.: 3635

## **AMENDMENT/REPLY TRANSMITTAL LETTER**

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Enc	losed is a reply for the above-identified patent application.					
×	A Petition for Extension of Time is also enclosed.					
	Terminal Disclaimer(s) and the \$\infty\$\$ \$65.00 (2814) \$\infty\$\$ \$130.00 (1814) fee per Disclaimer due under 37 C.F.R. § 1.20(d) are also enclosed.					
$\boxtimes$	Also enclosed is/are new Figure 1.					
	Small entity status is hereby claimed.					
	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the ☐ \$395.00 (2801) ☐ \$790.00 (1801) fee due under 37 C.F.R. § 1.17(e).					
	Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.					
	Applicant(s) previously submitted					
	on,					
	for which continued examination is requested.					
	Applicant(s) requests suspension of action by the Office until at least which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.					
	A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.					

Attorney Docket No. 003750-039

Application No. <u>10/617,728</u>

X	No additional claim fee is required.
	An additional claim fee is required, and is calculated as shown below.

AMENDED CLAIMS								
	No. of Claims	Highe: of Cla Previo Paid	aims ously	Extra Claims		Ra	te	Additional Fee
Total Claims	23	MINUS	23 =	0	x	\$50.00	(1202) =	\$ 0.00
Independent Claims	2	MINUS	3 =	0	×	\$200.00	(1201) =	\$ 0.00
If Amendment adds m	nultiple depen	dent claim	s, add	\$360.00 (1203)				
Total Claim Amendment Fee							\$ 0.00	
Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee						\$ 0.00		
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT							\$ 0.00	

Ш	A check in the amount	of is enclosed for the fee due
	Charge	to Deposit Account No. 02-4800.
	Charge	to credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

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Date: 13 December 2004

Ву \_\_

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